ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	. ID NO.	DATE				
FEE DETERMINATION	94		1, 13, 01				
O.I.P.E. CLASSIFIER	A.	Ja.	10x5x4				
FORMALITY REVIEW	Schan	10897	3/16/0				
RESPONSE FORMALITY REVIEW	SI	10 TO TO	9-11-01				
		0	17701				

INDEX OF CLAIMS

~	Rejected	N	Non-elected
	Allowed		Interference
_	(Through numeral) Canceled	Α	
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Claim Date	Claim Date	Claim
Claim Date	Final Original	Final Original
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 	52 53	102
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2)	57	107
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17	67	117
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